

# WHAT'S HAPPENING WEDNESDAY

## Kansas Immunization Program

September 16, 2020

### VFC Consultant On-Call

The Consultant On-Call can be reached Monday—Friday, 8 a.m.—5 p.m. at 785-296-5592.



## CHIEF CHAT

We know everyone has been extremely busy with back-to-school and influenza vaccinations, and of course the COVID-19 pandemic response. As we move through the pandemic response we all wait to learn when a vaccine will be available. While that answer cannot be definitively stated, there are some things that can be shared about the COVID-19 vaccine planning efforts.

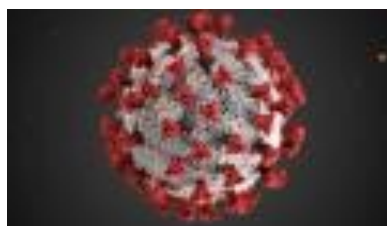
As a reminder, [Operations Warp Speed \(OWS\)](#) has a goal of delivering 300 million doses of safe and effective COVID-19 vaccine by January 2021. While you can read more about OWS, the goals, and how things will be accomplished, I want to share some additional items of interest that have been learned.

*Please note that this information is ever-evolving and is subject to change.*

There will be 3 Phases to vaccine distribution.

- Phase 1. A limited number of COVID-19 vaccine doses will be available. Vaccine will be available to priority groups, which have not been determined at this time.
- Phase 2. A large number of doses will be available for use in specific populations at increased risk for severe COVID-19 and other high priority groups.
- Phase 3. There will be widespread vaccine available to all populations.

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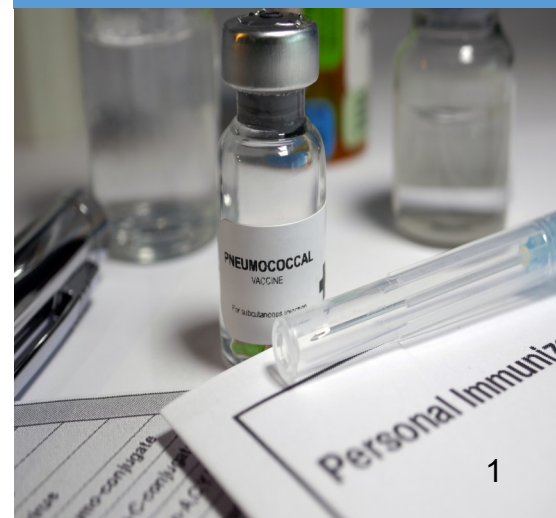
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# CHIEF CHAT (Continued)

There could be several presentations of the COVID-19 vaccine, many requiring a 2-dose series. The vaccine presentations will not be interchangeable, meaning that individuals need to have the same vaccine for the second dose that they received for the first dose. Vaccination will need to be repeated in 21 to 28 days, depending on the vaccine.

Vaccine presentations will require different storage and handling considerations. Vaccines will require cold (2 to 8 degrees Celsius), frozen (-15 to -50 degrees Celsius), or ultra-cold (-80 degrees Celsius) storage. The Centers for Disease Control and Prevention (CDC) is working with vaccine manufacturers to develop a solution for the vaccine requiring ultra-cold storage so vaccine providers do not need to purchase ultra-cold storage units.

The overall goal is to vaccinate everyone in the United States. A total of 660 million cumulative doses of COVID-19 vaccine are expected to be available. Vaccine will be distributed directly to clinics with guidance from state and local partners. It will be necessary to leverage many partners to ensure a successful vaccination campaign. It will take a village to be successful!

Internally, the Kansas Immunization Program has been directed by the CDC to develop a COVID-19 Vaccine Plan. This plan will describe the operational plan for distributing COVID-19 vaccine across the state. As plans are finalized, more information will be shared. In addition, there are weekly CDC conference calls, technical assistant meetings, and internal planning meetings. Things are moving very quickly!

More information will be shared in future newsletters.

## Vaccine Doses

More vaccinations were ordered and given in August than any other month this year. A total of 42,105 doses were ordered. Even with this increase, it only compares to 70% of the doses ordered and 80% of the doses given in August 2019. In the annual vaccination cycle, we are gearing up for the peak month of October and vaccination activities should continue to increase.



# INJECTION OF EDUCATION

This scenario plays out more than vaccine providers would like; a patient presents to the clinic for vaccines but does not have a copy of their immunization record. Now what? How do you know what they have already received and what they need to receive? Sometimes, finding that record can be a time-consuming process; where do you begin? If you, as a vaccine provider, have access to the State of Kansas' Immunization Registry, KSWebIZ, start there. Most health departments, physician's offices, and pharmacies enter vaccinations in KSWebIZ. This is the case even more so since the July 2020 reporting mandate.

Patients or parents can attempt to [locate records](#) by approaching previous day care providers, camps, schools, or colleges attended. Vaccine history is required for most of these facilities. Adults can also check with previous employers, if vaccine history was required. Another location people may not think to look is old keepsakes such as baby books or places where important records are stored.

The Centers for Disease Control and Prevention (CDC) [Vaccine Recommendations and Guidelines of the Advisory Committee on Immunization Practices](#) (ACIP) states, "Vaccination providers frequently encounter persons who do not have adequate documentation of vaccinations. With the exception of influenza vaccine and PPSV23, providers should only accept written, dated records as evidence of vaccination; self-reported doses of influenza vaccine and PPSV23 are acceptable. The rationale for acceptance for influenza vaccine is that the time period of recall is one year or less, making it very likely that correct recall will occur. The rationale for acceptance for PPSV23 is high frequency of vaccination leads to an increased rate of local reactions due to the reactogenicity of this vaccine.

Although vaccinations should not be postponed if records cannot be found, an attempt to locate missing records should be made... If records cannot be located within a reasonable time, these persons should be considered susceptible and started on the age-appropriate vaccination schedule. Serologic testing for immunity is an alternative to vaccination for certain antigens (e.g., measles, rubella, hepatitis A, and tetanus). However, commercial serologic testing might not always be sufficiently sensitive or standardized for detection of vaccine-induced immunity (with the exception of hepatitis B vaccination at 1-2 months after the final dose)."

When patients receive vaccines, encourage them to keep their immunization record where it can be easily found. Parents should be encouraged to keep their [child's records readily available](#) as children and adolescents require multiple vaccinations throughout the years and records are required for day care and school entry.



# Injection Of Education (Continued)

Be sure to enter all vaccines administered, both public and private, into KSWebIZ. Patients may move from location to location. Because KSWebIZ is a state-wide registry, other vaccination locations can easily look at the patient's vaccine history if a patient presents without immunization records.

In the end, if the records cannot be located, vaccinations should be restarted. Revaccinating does not cause harm, but perhaps, if patients knew without documentation, vaccinations would need to be repeated, they might be careful with the keeping of records. Patients, parents, or guardians can request a copy of immunization records found in KSWebIZ by contacting the KSWebIZ Helpdesk at 877-296-0464 or at [kdhe.immunizationregistry@ks.gov](mailto:kdhe.immunizationregistry@ks.gov).

## KS WebIZ Temperature Management

A Special Alert was sent out on Wednesday, July 29 with information for VFC providers on digital data logger replacements. Many clinics have KIP-supplied digital data loggers (DDL) with certificates of calibration that have or will soon expire. Berlinger, the DDL manufacturer, is in the process of shipping replacement DDLs to VFC providers in Kansas.

All VFC providers are required to use Kansas Immunization Program (KIP) supplied digital data loggers (DDLs) to monitor temperatures of vaccine storage units that house publicly-funded vaccine. Included in this requirement is managing temperature information in KSWebIZ.

All clinics need to ensure the replacement DDLs information is updated in KSWebIZ. Instructions for this process can be found in the Reports module of KSWebIZ under the Documents section. The KSWebIZ Temperature Management Manual provides step-by-step instructions for how to replace a thermometer by retiring the old DDL information and adding a new one.

Additional instructions were added this year for adding the certificate of calibration. It is important to enter this information in KSWebIZ so KIP can ensure the clinic receives a replacement DDL when the certificate of calibration expires.

If you have any questions or concerns about replacing the DDLs, please contact your Regional Immunization Consultant or the Consultant on Call at 785-296-5592. If your DDL has expired and you have not received a replacement DDL, please email [kdhe.vaccine@ks.gov](mailto:kdhe.vaccine@ks.gov) and we will get a replacement sent to you as soon as possible.

# Tuberculosis Tidbit

Oh no! You have been waiting and waiting for results on your patient's TB specimen and you just found out it was rejected! What can you do to avoid this in the future? Every month the Kansas Health and Environmental Labs (KHEL) sends the TB program a list of specimens that were invalid or unusable. This list includes what facility submitted the specimen, the date of collection, the patients name, the type of specimen, and the reason the specimen was rejected. Below we have outlined some of the common reasons specimens are rejected so you can avoid recollecting specimens!

Specimen Type	Reason for Rejection	Corrective/Preventative Action
QFT	Received at the lab more than 72 hours after incubation	Be sure to ship the specimen quickly enough that it can be received within the 72 hour window**
QFT	Collection tubes are past the expiration date	Always check the expiration date of the collection tubes prior to use**
QFT	Not enough blood in collection tube	Blood must reach the black line on the side of the vial for the specimen to be tested.
Clinical (Sputum)	Specimen leaked in transit	Secure the lid of the specimen container tightly prior to packaging to prevent leaking during transit.
Clinical (Sputum)	Not enough Sputum in specimen container	Sputum specimens should contain between 5 and 10ml per collection. Amounts less than 5ml are difficult to test and ensure valid results.
Clinical (Sputum)	Received at the lab more than 7 days after collection	Be sure to ship the specimen quickly enough that it can be received within the 7 day window**

\*Verify with your courier or the hospital with whom you collaborate when the specimen will be sent to the lab

\*It is not recommended to use USPS to ship specimens as there has been difficulty in ensuring the specimen arrives in time. The state TB program can provide (via fax or email) a FedEx shipping label to your health department upon request. Please contact Maddisen Rivera at [maddisen.rivera@ks.gov](mailto:maddisen.rivera@ks.gov) to request a specimen shipping label

\*\*If your tubes are expired or you are running low on tubes please complete the Requisition for Laboratory Specimen Kits form found here: [https://www.kdheks.gov/labs/cust\\_serv/download/specimen\\_kit\\_request\\_form.pdf](https://www.kdheks.gov/labs/cust_serv/download/specimen_kit_request_form.pdf)